

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		05-31-01
O.L.P.E. CLASSIFIER		<i>[Signature]</i>	6/11/01
FORMALITY REVIEW	<i>[Signature]</i>	1085	7-15-01
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	<i>[Signature]</i>	7/11/01

INDEX OF CLAIMS

Rejected ☐ II ☐ Non-elected
 Allowed ☐ I ☐ Interference
 (Through numerical) Canceled ☐ A ☐ Appeal
 Restricted ☐ O ☐ Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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